## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

BS00.363

| CLAIMS AS FILED - PART I   |  |   |                     |                               |                              |  |          | SMALL ENTITY                          |                        |    | OTHER THAN          |                        |  |
|--|--|---|---------------------|-------------------------------|------------------------------|--|----------|---------------------------------------|------------------------|----|---------------------|------------------------|--|
|  |  |   | (Column 1)          |                               | (Column 2)                   |  | •        | TYPE                                  |                        | OR | OR SMALL ENTITY     |                        |  |
| TOTAL CLAIMS   |  |   | 55                  |                               |                              |  |          | RATE                                  | FEE                    |    | RATE                | FEE                    |  |
| FC   | R  |   | NUMBER FILED        |                               | NUMB                         | NUMBER EXTRA                                 |          | BASIC FEE                             | 355.00                 | OR | BASIC FEE           | 710.00                 |  |
| TC   | TAL CHARGEA                                    | BLE CLAIMS                                | <b>JJ</b> minus 20= |                               | • 35                         |  |          | X\$ 9=                                |                        | OR | X\$18=              | 630                    |  |
| INE  | DEPENDENT CL                                   | AIMS                                      | 7 minus 3 =         |                               | 4                            | 4  |          | X40=                                  |                        | OR | X80=                | 320                    |  |
| MU   | ILTIPLE DEPEN                                  | IDENT CLAIM PE                            | RESENT              |                               |                              | <u> </u>                                     |          | +135=                                 |                        | OR | +270=               |                        |  |
| * If the difference in column 1 is less than zero, enter "0  |  |   |                     |                               |                              | olumn 2                                      | l        | TOTAL                                 |                        | OR | TOTAL               | 1660                   |  |
| CLAIMS AS AMENDED - PART II  |  |   |                     |                               |                              |  |          |                                       |                        |    | OTHER               | OTHER THAN             |  |
|  | (Column 1) (Column 2) (Column 3)               |   |                     |                               |                              |  |          | SMALL E                               | NTITY                  | OR | SMALL               | ENTITY                 |  |
| AMENDMENT A  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                     | HIGH<br>NUM<br>PREVIO<br>PAID | IBER<br>OUSLY                | PRESENT<br>EXTRA                             |          | RATE                                  | ADDI-<br>TIONAL<br>FEE |    | RATE                | ADDI-<br>TIONAL<br>FEE |  |
|  | Total  | *   | Minus               | **                            |                              | =  |          | X\$ 9=                                |                        | OR | X\$18=              |                        |  |
|  | Independent                                    | *   | Minus               |                               |                              | <u>                                     </u> |          | X40=                                  |                        | OR | X80=                |                        |  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |  |   |                     |                               |                              |  |          | +135=                                 |                        | OR | +270=               |                        |  |
| <u>L</u>   |  |   |                     |                               |                              |  |          | TOTAL                                 |                        | OR | TOTAL               |                        |  |
| ADDIT. FEE ADDIT. EE   |  |   |                     |                               |                              |  |          |                                       |                        |    |                     |                        |  |
| _  |  | (Column 1)<br>CLAIMS                      |                     | HIGH                          | HEST                         | (Column 3)                                   | ,<br>ה   | · · · · · · · · · · · · · · · · · · · | ADDI-                  |    |                     | ADDI-                  |  |
| AMENDMENT B  |  | REMAINING<br>AFTER<br>AMENDMENT           |                     | PREVI                         | MBER<br>OUSLY<br>FOR         | PRESENT<br>EXTRA                             |          | RATE                                  | TIONAL<br>FEE          |    | RATE                | TIONAL<br>FEE          |  |
|  | Total  | *   | Minus               | **                            |                              | =  |          | X\$ 9=                                |                        | OR | X\$18=              |                        |  |
|  | Independent                                    | *   | Minus               | ***                           |                              | <u> </u>                                     |          | X40=                                  |                        | OR | X80=                |                        |  |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                     |                               |                              |  |          |                                       |                        |    |                     | <u> </u>               |  |
|  |  |   |                     |                               |                              |  |          | +135=                                 |                        | OR |                     |                        |  |
|  |  |   |                     |                               |                              |  |          | TOTAL<br>ADDIT. FEE                   |                        | OR | TOTAL<br>ADDIT. FEE |                        |  |
|  |  | )   |                     |                               |                              |  |          |                                       |                        |    |                     |                        |  |
| AMENDMENT C  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                     | NUM<br>PREVI                  | HEST<br>MBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA                             |          | RATE                                  | ADDI-<br>TIONAL<br>FEE |    | RATE                | ADDI-<br>TIONAL<br>FEE |  |
| ND N   | Total  | *   | Minus               | **                            |                              | =  |          | X\$ 9=                                |                        | OR | X\$18=              |                        |  |
| ME   | Independent                                    | *   | Minus               | ***                           |                              | ]=   |          | X40=                                  |                        | OR | X80=                |                        |  |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                     |                               |                              |  |          |                                       |                        |    |                     | <b> </b>               |  |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  |  |   |                     |                               |                              |  |          |                                       |                        | OR | +270=               |                        |  |
| **   | If the "Highest Nu                             | mber Previously Pa                        | aid For IN THI      | IS SPACE                      | is less tha                  | an 20, enter "20                             | -<br>ر", | TOTAL<br>ADDIT. FEE                   |                        | OR | TOTAL<br>ADDIT. FEE |                        |  |
| ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |  |   |                     |                               |                              |  |          |                                       |                        |    |                     |                        |  |